

Tennessee Board of Osteopathic Examination



Newsletter



A regulatory agency of the State of Tennessee

Cordell Hull Building, First Floor, 425 Fifth Avenue North, Nashville, TN 37247-1010

• www.TennesseeAnytime.org

BIOTERRORISM

The September 11, 2001 attacks on the World Trade Center and Pentagon and the sending of anthrax laden letters through the mail has raised concerns in the United States about bioterrorism, the intentional release of harmful biological agents into populated areas, with the intent of causing fear, illness, or death. Initial response to a deliberate release of infective or toxic agents against civilian populations is largely a local responsibility. Local authorities have the greatest opportunity to impact positively on events, and will generally be held accountable should the incident be mishandled. While national resources will play an important long-term role, it is the responsibility of local officials to have response systems and plans in place before an incident actually occurs. Part of any response system must include the ability to provide information to the state's medical doctors and osteopathic physicians.

Because early diagnosis of either biological or chemical exposure will be an important prerequisite for establishing treatment and response modalities, it is critically important that the Department of Health be in a position to disseminate to physicians crucial information on outbreaks

and other health events. To that end, the Department of Health has partnered with Professional Review Organization (PRO) to collect e-mail addresses and/or fax numbers of all of Tennessee's licensed osteopathic physicians. This information will be placed in the State's data base and used to provide practitioners with critically important information.

You may choose to provide e-mail and/or fax information to the Department by accessing the Board's website at www.tennesseeanytime.org/hlrs and proceeding as prompted. Alternatively, you may fill out the attached form and return it to the Board's Administrative Office, Cordell Hull Building, First Floor, 425 Fifth Avenue North, Nashville, TN 37247-1010.

Please respond in as timely a manner as possible. The Department's ability to communicate information directly to osteopathic physicians is crucial should they be required to handle any casualties that would result from a chemical or biological attack.

SUPERBACTERIA!

Antibiotics Becoming Less Effective Against New "Superbacteria"

For over half a century, doctors have relied on antibiotics to treat many infections. When first introduced in the 1940s, it was thought they would be able to fight against bacterial infections forever. These "miracle drugs" have allowed us all to live longer and healthier lives. However, many bacteria that were easily treated by antibiotics in the past are now unaffected by those drugs, largely because of misuse and overuse of antibiotics.

The Centers for Disease Control and Prevention (CDC) estimates that over 50 million unnecessary prescriptions of antibiotics are written each year. Why are so many antibiotics being prescribed? Many people do not realize that antibiotics only fight infections caused by bacteria, but they are not useful in treating infections caused by a virus--like the common cold or the flu. Patients often pressure their doctors for antibiotics for themselves or their sick children, and sometimes doctors grant this request so patients will leave satisfied. In addition, misuse often occurs because people "save" some of an antibiotic for the next time they get sick or take an antibiotic prescribed for someone else.

"We must begin to curb the inappropriate use of antibiotics, or bacteria will eventually become impervious to even the strongest drugs. If that happens, antibiotics will become less and less effective and it will become more difficult to treat common bacterial infections," said Dr. Allen Craig, State Epidemiologist.

How do these tough, drug-resistant strains of bacteria develop? Taking antibiotics when you don't need them can increase your risk of having resistant bacteria if you get sick. Everyone has bacteria living naturally in our bodies. When you take an antibiotic for a viral infection, these normal bacteria are exposed to antibiotics. This exposure can kill off these naturally occurring bacteria while antibiotic-resistant organisms survive, becoming a kind of "superbacteria."

The CDC estimates that each year, *Streptococcus pneumoniae* infections cause 100,000-135,000 hospitalizations for pneumonia, 7 million ear infections, and over 60,000 other serious infections, including 3,300 cases of meningitis. In the early 1980s, penicillin could treat up to 99 percent of these cases. Today, in Tennessee, resistance rates for penicillin range from 35 to 50 percent.

"It is important that we develop educational campaigns to target both parents and clinicians concerning appropriate antibiotic use. Studies suggest that educational campaigns designed for both the public

and physicians lead to fewer antibiotic prescriptions. Decreased antibiotic use leads to a decrease in resistance rates," said Dr. Craig.

The Tennessee Department of Health's statewide campaign is gaining momentum and will focus on educating parents and health care providers about the importance of appropriate antibiotic use and risks of resistance. In the spring of 2002, the Department brought together clinicians, parents, pharmaceutical companies, day care center staff and other interested parties to form a coalition to determine how to get the message out about proper antibiotic use. If you are interested in joining this coalition, or would like more information about this topic, contact Katie Garman at 615-741-7247 or katie.garman@state.tn.us.

BOARD OF OSTEOPATHIC EXAMINATION Board Members

A six-member board was appointed by the Governor for five-year terms. Five members shall be osteopathic physicians, residents of Tennessee, graduates of a legally chartered osteopathic college in good standing and having the power to confer degrees in osteopathic medicine and shall be actively engaged in the practice for a period of a least five years. One member shall be a public member who does not engage in any profession, business, or activity subject to regulation by the Board.

- ❖ Thomas L. Ely, D.O., President
- ❖ Jill Robinson, D.O., Vice President
- ❖ Donald H. Polk, D.O.
- ❖ Paul G. Smith, Jr., D.O.
- ❖ Samuel J. Chung, D.O.
- ❖ Andy Chagaris, Citizen Member

BOARD OF OSTEOPATHIC EXAMINATION LICENSING ONLINE

Renewing Your Professional License Just Got a Bit Easier at

www.TennesseeAnytime.org/HLRS/

Beginning in December 2001, renewing your professional health license got a bit easier. The Department of Health has implemented an online process that allows all professions and facilities of Health to renew their licenses online and/or update their information. The process is quick, simple, secure, and convenient – and even allows you to pay for your renewal with a credit card.

OKAY, SO HOW DO I RENEW ONLINE?

In just four quick steps you'll be there...

Step One – Login In. As a professional, you'll need to select your board, profession and enter your profession license number, your date of birth and social security number or your transaction number from your renewal notice.

Step Two – Update Your Information. Here you'll have the opportunity to update your home address, your work address and even your billing address. Once you've completed entering that information, you're halfway done!

Step Three – Enter your Renewal Information. At this step you'll answer all necessary questions and provide information on licenses from other states. You'll have the ability to update your education information and list your principal place of employment.

Step Four – Payment. Here's where it all comes together. By entering your credit card through the secure site and choosing "submit," you will have completed the online renewal application. **Only choose submit one time!**

WHAT HAPPENS NEXT?

Your renewal information will be posted to the Department of Health's licensing system and once you have met all of the criteria for your profession, you will be mailed your renewal certificate.

That's it – you're done!

So, come check it out and renew online – or even just update your information. We'll see you at www.TennesseeAnytime.org/hlrs!

MAKING THE RENEWAL PROCESS WORK Common Pitfalls to Avoid

If you choose not to renew online, you can ensure that the renewal process will work...and work the first time, every time for you. There are common pitfalls that are shared by persons in each profession. Recognizing these common errors may assist you in avoiding them and ensure trouble-free renewals. Here's how:

Sign your renewal - All applications must bear the licensee's signature.

Return the renewal form intact - Don't separate the

one-page renewal form. While it looks like you could, and perhaps should, separate your renewal application, return the original form in ONE PIECE.

Keep your address current – Mail (including your renewal form) is generated using a computer program, which downloads the address the Board's Office has on file for you. If the Board's Office has an incorrect address, the incorrect address will be used for your renewal.

If you are a doctor, file your PPQ (or update) – By statute, we cannot renew your license UNLESS you have a Practitioner Profile Questionnaire on file. (If you need to update your PPQ, simply copy from the one on the internet, make changes in red, and send it to the Board's Office.)

If answering "YES" to any one of the three questions on the back of your renewal, provide an explanation

- The Board's Office cannot process your renewal until we have written documentation [letter from your physician, court/disciplinary board order(s), etc.] and your written explanation of the events which made you answer "Yes" on your renewal.

Mail the appropriate fee with your renewal application – Some renewals are received without the fees, or fees are sent separately from renewals, or fees are sent in the wrong amounts.

If any of these errors are made, the renewal application will not be smoothly processed, if at all. Remember, failure to renew by the end of the 60 day grace period will subject the license/registration to administrative revocation for which reinstatement will be required.

Address Changes Responsibility of Licensee

The Board's administrative office mails renewal forms to licensees at the last known address of the licensee. The last known address is the address on the most recent renewal application a licensee submits to the Board's administrative office (or the address on the licensee's initial application if the licensee has practiced less than two years). **It is the responsibility of the practitioner to notify the Board's administrative office if he/she has changed addresses.** TCA §63-1-108(c) provides that "if any registrant changes addresses during the year for which any certificate of registration has been issued by the division, such registrant, within thirty (30) days thereafter, shall notify the division of such change" The practitioners' cooperation will assure that renewal forms reach the appropriate destination in a timely manner.

BOARD'S OFFICE FIELDS COMPLAINTS: Patients, Practitioners, & Medical Records

What do you do when a patient requests a copy of their medical record? Simply, comply with T.C.A. §63-2-101 and 102. These statutes regulate, for all health-related boards, what the patients' and practitioners' rights and duties are.

Here's a summary:

(1) The patient (or patient's authorized representative) must furnish a written request for the medical records;

(2) The doctor shall furnish the medical records within ten (10) working days;

(3) The doctor may charge a reasonable copying fee, as follows:

- <40 pages = not more than \$20.00
- >40 pages = \$20.00 up to 40 pages, then, .25¢ per page.

(4) The doctor may charge the actual cost of mailing the records; and

(5) The doctor may require that the patient, or patient's representative, pay the costs of copying prior to the "records being furnished". The patient then has the right to his or her medical records **without delay**.

CREDENTIAL VERIFICATION

If you are an employer who wishes to check your assistant's credentials, you may do so by accessing the automated phone system and request a faxed verification. The facsimile verification will denote all certifications which are possessed by the assistant. Please follow these steps:

- Dial 1-888-310-4650
- Listen to the entire first message. Listen for the "pause". Then, listen to the **second** message.
- "To obtain information regarding a health professional, such as. . doctor. .etc." [Press 1]
- "To verify the status of a license, or. . . ." [Press 1]
- "To search our database, you will need the Social Security Number of the health professional. To verify the license status, you can press 1, or visit...." [Press 1]
- "Please enter the person's Social Security Number" [Enter the SSN]
- [Verify SSN and Press 1, if correct]
- [Press 1 to ask for a fax. Enter your area code and fax machine number.]

CHANGES OF ADDRESS

Must be reported (in writing or by web) to the Board's Office within 30 days!

- **Your name and license number;**
- **Your profession;**
- **Your old address and phone number;**
- **Your new address and phone number, e-mail address, and/or your fax number; and**
- **Your SIGNATURE!**

Board's Fax Number: 615-253-4484 or on the Board's Website at www.tennesseeanytime.org.

STATUTORY CHANGES

Prescription Monitoring

On July 3, 2002, the Governor signed into law, Public Chapter 840, Senate Bill 2534, the Controlled Substance Monitoring Act. Under the Act, an advisory committee has been created for the express purpose of creating a database to assist in research, statistical analysis and the education of health care practitioners concerning patients who, by virtue of their conduct in acquiring controlled substances, may require counseling or intervention for substance abuse, by collecting and maintaining data regarding all controlled substances in Schedules II, III and IV dispensed in the state. The data will be submitted to the committee by any practitioner, pharmacist, or pharmacy who dispenses a controlled substance contained in Schedules II, III and IV.

Currently, some 18 states utilize this tracking and monitoring system to eliminate "doctor shopping" by patients who are seeking controlled substances for self-medication or for diversionary purposes (use by family member or friend, or for resale on the street).

Thomas L. Ely, D.O., represents the Osteopathic Examination Board on the Advisory Committee.

Continuing Medical Education

In May, 2001 the General Assembly passed a new law, Public Acts, 2001, Chapter No. 320 which amended T.C.A. Title 63, Chapter 6, requiring any licensed osteopathic physician in this state to "complete continuing medical education". The Board approved rules that require all licensees complete, during the two (2) calendar years (January 1 through December 31) that precede the licensure renewal year, forty (40) hours of Category I-A and II-A continuing medical education as

defined in the most current annual American Osteopathic Association Yearbook and Directory, in courses approved by the Board. Osteopathic physicians will be required to retain the documentation for four years and will only submit the documentation to the board office when requested. See Board Rule 1050-2-.12 available on the Board's website.

Intractable Pain

In May, 2001, the "Intractable Pain Treatment Act" became law. TCA § 63-6-101, et seq amends TCA Title 39, Title 53, Title 63 and Title 68 and specifically addresses the treatment of intractable pain. The Board has adopted rule 1050-2-.13 (5) which implements the Intractable Pain Treatment Act and can be accessed through the Board's website at www.tennesseeanytime.org.

Physician Assistant Amended Prescriptive Practices

Public Chapter 527 was signed into law in March 2002. Public Chapter 527 amends TCA §63-19-107(B) which had provided that any prescription written and signed and/or any drug issued by a physician assistant was deemed to be that of the osteopathic physician under whose supervision and control the physician assistant is prescribing. The physician assistant was required to **sign both the supervising osteopathic physician's name as well as his/her own**. Under Public Chapter 527, "the physician assistant shall **sign his or her name on each prescription** so written. Where the preprinted prescription pad contains the names of more than one physician, the physician assistant shall indicate on the prescription which of those physicians is his or her primary supervising physician by placing a checkmark beside or a circle around the name of that physician." [emphasis added.]

RULE CHANGES

Fee Increases

The Board adopted a rule amending Rule 1050-2-.02 **FEES**. The Attorney General has approved the Board's action increasing fees. The fee increases are effective December 1, 2002. The new fee schedule will be as follows:

- Application Fee \$400.00
- Licensure Renewal Fee \$275.00
- Late Licensure Renewal Fee \$200.00

Treatment of Chlamydia Trachomatis

The Board has adopted a rule amending Rule 1050-2-.13 **Specifically Regulated Areas and Aspects of Medical Practice**. The rule has been signed by the Attorney General and becomes effective January 6, 2003. At that time the, osteopathic physicians and those over whom they exercise responsibility and control, will be able to treat partners of patients infected with Chlamydia Trachomatis ("CT").

Under the amended rule, an osteopathic physician must first have a fully documented medical record for a patient before he/she may provide partner treatment. Full documentation includes:

1. A laboratory-confirmed Ct infection without evidence of co-infection with gonorrhea or other complications suggestive of a relationship to Ct infection; and
2. Provision of treatment of the patient for Ct; and
3. An attempt to persuade the infected patient to have all partners evaluated and treated and the patient indicated that partners would not comply; and
4. Provision of a copy of reproducible, department-provided Ct educational fact sheet or substantially similar Ct-related literature available from other professional sources to the patient with copies for all partners; and
5. Counseling the patient on sexual abstinence until seven days after treatment and until seven days after partners have been treated; and

Thereafter, osteopathic physicians or those who provide medical services under their responsibility and control may either:

1. Provide to the treated patient non-named signed prescriptions for, or dispense to the patient, the appropriate quantity and strength of azithromycin sufficient to provide curative treatment for the total number of unnamed "partners" as defined in subparagraph (b) and indicated by the patient.
2. Provide to the treated patient signed, name-specific prescriptions for, or dispense to the patient, the appropriate quantity and strength of azithromycin sufficient to provide curative treatment for the total number of known partners as defined in subparagraph (b) and named by the patient.

Code Of Ethics

The Board has adopted as its code of medical ethics, the "Code of Ethics" published by the American Osteopathic Association as it may, from time to time, be amended. Under the rule, the AOA's Code of Ethics is adopted in its entirety as the Board's Code of Ethics. Any violation of the Board's Code of Ethics shall be grounds for disciplinary action pursuant to TCA § 63-9-111 (b) (1). The rule's citation will be 1050-2-.13 (8).

Prescription Legibility

Rule 1050-2-.13 (3) regarding prescription legibility has also been the subject of a rule change. Physicians now "may utilize a legible and specifically identifying electronic signature to satisfy the requirements of [Rule 1050-2-.13 (3)] and as the official certifying act of the physician."

Rule changes may be accessed by using the Board's website, or by contacting the Board's Office to receive a copy.

X-RAY OPERATORS IN OSTEOPATHIC PHYSICIAN'S OFFICES Working Beyond Scope Makes Disciplinary Action Possible

Remember that certification is required of **all** persons operating x-ray machines in osteopathic physicians' offices in Tennessee except for the following exempt individuals:

- ✓ Licensed osteopathic physicians
- ✓ Medical interns, residents and clinical fellows
- ✓ Students engaged in clinical practice while enrolled in a Board approved radiological education course required to receive radiological certification
- ✓ Graduates of a Board approved radiological education course who are awaiting examination but only for a period not to exceed six months from the date that the course was completed.
- ✓ Students and graduates must at all times practice under supervision.

Each person certified by the Board must practice **only** in the certified specialty areas contained on the certificate as issued or upgraded and only for the types of radiographs specified in these rules. Practicing radiography beyond the scope of certification is grounds for decertification. Certificates issued by the Board are

subject to being disciplined for the same causes, to the same extent and pursuant to the same procedures as issued osteopathic physician licenses.

No x-ray procedures may be performed by any person holding a certificate without:

- ✓ An order from a licensed physician or an osteopathic physician; and
- ✓ Close supervision, responsibility and control over the services provided by a licensed physician or osteopathic physician.

When the public calls to complain about x-ray operators possibly working beyond the scope of their licenses, they are transferred to the Office of Investigations, or directed to the Board's website to obtain a complaint form. When the Board's Office receives a written complaint against a practitioner, the complaint is acknowledged, in writing by the Board's Director, and then transferred to Investigations.

Remember, it is the osteopathic physician's responsibility to insure that x-ray operators in their offices are properly certified by the Board.

BUPRENORPHINE

The Drug Addiction Treatment Act of 2000 (DATA 2000) expands the clinical context of medication-assisted opioid addiction treatment by allowing qualified office-based osteopathic physicians to dispense or prescribe specially approved schedule III, IV and V narcotic medications for the treatment of narcotic addiction. In addition DATA 2000 reduces the regulatory burden on osteopathic physicians who choose to practice office-based opioid therapy (OBOT) by permitting qualified physicians to apply for and receive waivers of the special registration requirements defined in the Narcotic Addiction Treatment Act and the Controlled Substances Act.

On November 15, 2002, the Department of Health held its first Buprenorphine training to physicians with interest and/or experience in treating opioid-dependent patients. The Department anticipates future training seminars in various locations around the state. When those dates and locations are established, you may get that information from the Board's Noteworthy Section of its website at www.tennesseeanytime.org/hlrs.

For more information on buprenorphine, including osteopathic physician waiver requirements, on site training opportunities and how to request a waiver, please see <http://buprenorphine.samhsa.gov>.

PEER ASSISTANCE SERVICES AVAILABLE FOR ALL LICENSEES AND APPLICANTS

The Physicians' Health Program is a peer assistance program provided by the Tennessee Medical Foundation, a subsidiary of the Tennessee Medical Association. The program offers consultation, referral and monitoring for osteopathic physicians whose practice is impaired, or potentially could be impaired, due to the use of drugs or alcohol or a psychological or physiological condition.

A referral can be made confidentially by an employee assistance program, a co-worker, family member, friend or the practitioner him/herself. If the practitioner is willing to undergo a thorough evaluation to determine the extent of the problem and any treatment needed, all information may be kept confidential from the Board. The Board also makes referrals to the Physicians' Health Program when a rehabilitation program is deemed appropriate as a part of any disciplinary action.

Chemical dependency is a significant problem among health professionals and is a chronic, progressive illness that can be treated effectively. As with all chronic illnesses, the earlier the identification and treatment, the better the prognosis. Some signs of chemical dependence are:

Mood swings, inappropriate behavior at work, frequent days off for implausible reasons, non-compliance with acceptable policies and procedures, deteriorating appearance, deteriorating job performance, sloppy and illegible charting, errors in charting, alcohol on breath, forgetfulness, poor judgment, and lack of concentration.

If you have any questions or concerns, contact:

Physicians' Health Program at:
216 Centerview Drive #304
Brentwood, TN 37027
Phone: 615-467-6411
Fax: 615-467-6419

Services are available to those practitioners, whether or not they have had disciplinary action by the Board. For more information, please refer to the Board's website, or contact the Program.

LICENSURE STATISTICS

New Licensees Issued in 2002

Osteopathic Physicians 58

2003 BOARD MEETING DATES

February 12
May 14
August 13
November 12

All meetings begin at 9:00 a.m., Central Time.

Board meetings are held at the Board's office and are open to the public. Dates are subject to change, but are listed on the Board's website. [In the event of an electronic meeting, a conference room is made available to the public and is the location from which the electronic meeting is conducted.]

REFERENCE NUMBERS FOR THE BOARD

Phone Number: 1-888-310-4650, ext. 24384
Fax Number: 615-253-4484

Hours of Operation: 8:00 a.m. to 4:30 p.m.,
Central Time

Tennessee Board of Osteopathic Examination
First Floor, Cordell Hull Building
425 Fifth Avenue North
Nashville, TN 37247-1010



**Tennessee Board of Osteopathic Examination
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